## Case 19-01124-lmj7 Doc 1 Filed 05/16/19 Entered 05/16/19 11:49:30 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF IOWA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Ide	ntify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your ful	II name			
	your gov picture ic example license c Bring yo identifica	e name that is on vernment-issued dentification (for a, your driver's or passport).  ur picture ation to your with the trustee.	Marilyn First name  T Middle name  Kennedy Last name and Suffix (Sr., Jr., II, III)	-	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	used in	r names you have the last 8 years your married or names.	Marilyn T Cowles		
3.	your So number Individu	e last 4 digits of cial Security or federal ial Taxpayer eation number	xxx-xx-9219		

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Case number (if known)

Debtor 1 Marilyn T Kennedy

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 4118 Bowdoin Des Moines, IA 50313 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Polk** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Marilyn T Kennedy

ar	Tell the Court About	Your E	Bankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Re</i> page 1 and check the a		342(b) for Individuals Fili	ng for Bankruptcy	
	choosing to file under	Chapter 7							
			hapter 11						
			hapter 12						
			Chapter 13						
3.	How you will pay the fee		about how your order. If your	u may pay. Typ attorney is subi	oically, if you are paying	the fee yourself, you r		er's check, or money	
			about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address.  I need to pay the fee in installments. If you choose this option, sign and attach the Apta The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for obut is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you chothe Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it  No.  Yes.  District  When  Case numl  District  When  Case numl  Case numl				attach the Application for	r Individuals to Pay	
			I request that but is not req applies to you	t my fee be wa uired to, waive y ur family size ar	<b>lived</b> (You may request your fee, and may do so nd you are unable to pay	o only if your income is the fee in installment	s less than 150% of the of is). If you choose this opti	fficial poverty line that ion, you must fill out	
).	Have you filed for bankruptcy within the	■ N	0.						
	last 8 years?	☐ Y	es.						
			District				Case number		
			District				Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.						
			Debtor				Relationship to you		
			District		When		Case number, if known		
			Debtor				Relationship to you		
			District		When		Case number, if known		
11.	Do you rent your residence?	■ N	o. Go to I	ne 12.					
		☐ Y	es. Has yo	ur landlord obta	ained an eviction judgme	ent against you?			
				No. Go to line	12.				
				Yes. Fill out In this bankruptcy		n Eviction Judgment A	gainst You (Form 101A) a	and file it as part of	

		Document	2age 4 of 53	
Debtor 1	Marilyn T Kennedy		Case number (if known)	

	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	o Part 4.
		☐ Yes.	Name	e and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, State & ZIP Code
	it to this petition.		Chec	ck the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	s. If you in s, cash-f .C. 1116	nder Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure of (1)(B).  not filing under Chapter 11.
	For a definition of small	■ No.	i aiii	The filling drider Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code	filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy e.
		☐ Yes.	I am	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
		Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention
Part	4: Report if You Own or	•		
Part	Do you own or have any			
	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?
	Do you own or have any property that poses or is alleged to pose a threat	■ No.	If immed	the hazard?  diate attention is , why is it needed?

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Debtor 1 Marilyn T Kennedy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 Marilyn T Kennedy Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Marilyn T Kennedy Signature of Debtor 2 Marilyn T Kennedy Signature of Debtor 1 Executed on May 16, 2019 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Marilyn T Kennedy

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Samuel Z. Marks	Date	May 16, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Comment 7 Marks		
Samuel Z. Marks		
Printed name		
Marks Law Firm, P.C.		
Firm name		
4225 University Ave.		
Des Moines, IA 50311		
Number, Street, City, State & ZIP Code		
Contact phone (515) 276-7211	Email address	Office@markslawdm.com
IS 9998821 IA		
Bar number & State		

		Docume	ent Page 8 of 9	53	
Fill in this infor	mation to identify your	case:			
Debtor 1	Marilyn T Kenned	dy			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
Case number (if known)					☐ Check if this is an
					amended filing
0111111	4000				

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	108,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,126.19
	1c. Copy line 63, Total of all property on Schedule A/B	\$	117,126.19
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	98,212.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	89,802.59
	Your total liabilities	\$	188,014.59
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,251.56
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,729.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	hedules.
	■ Yes		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Document

Debtor 1 Marilyn T Kennedy

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: <b>OR</b> . Form 122B Line 11: <b>OR</b> . Form 122C-1 Line 14.

4,236.76 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula E/E compthe following:	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	50,502.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	50,502.00

Debtor 1  Marilyn T Kennedy First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF IOWA  Case number  Check if this is amended filin  Difficial Form 106A/B  Schedule A/B: Property  12/15  Leach category, separately list and describe items. List an asset only once. If an asset filts in more than one category, list the asset in the category where information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply Jupilex or multi-unit building Condominium or cooperative Manufactured or mobile home	Case	19-01124-1	mj/ Doc 1		ed 05/16/19	16/19 11:	49:30	Desc Main
Debtor 2 Spouse, if filing)  First Name  Middle Name  Last Name  Jorited States Bankruptcy Court for the:  SOUTHERN DISTRICT OF IOWA  Case number  Case number    Check if this is amended filin	Fill in this informa	ation to identify	your case and th					
Piet Name   Middle Name   Last Name	Debtor 1	Marilyn T Ke	ennedy					
Check if this is amended filing   First Name   Moddle Name   Last Name				Name	Last Name			
Check if this   amended filin   amended fili		First Name	Middle	Name	Last Name			
Check if this   amended filing   Check   It has a seen number   Check   Chec	nited States Banl	kruptcv Court for	the: SOUTHER	N DIST	RICT OF IOWA			
Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply  Des Moines  IA 50313-0000  City State ZIP Code  Who has an interest in the property? Check one  Who has an interest in the property? Check one  Debtor 2 only  Debtor 1 only  Debtor 2 only  Debtor 2 only  Debtor 2 only  Debtor 3 and Debtors and another  Other information you wish to add about this item, such as local		.,,						_
Check II Form 106A/B  Check AB: Property  Check all Spray (Ist the asset in the category where nk it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). swere every question.  The post of the property?  What is the property? Check all that apply  Street address, if available, or other description  What is the property? Check all that apply  Street address, if available, or other description  What is the property? Check all that apply  Des Moines  IA 50313-0000  City  State  ZIP Code  Who has an interest in the property? Check one  Who has an interest in the property? Check one  Who has an interest in the property? Check one  Describe the nature of your ownership interest of the eating property?  County  County  Check if this is community property	ase number							
contective A/B: Property  acach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where ink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), is were every question.  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  1.1							ı	g
Cichedule A/B: Property  acach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where nk it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), swere every question.  The property of the category where it is not property in the property of the category where every question.  The property of the category where it is not property in the property of the category where every question.  The property of the category where it is not property or the category where it is not property or the category where every question.  The property of the category where it is not property or the category where it is not property or the category where it is not property or the category where every question.  The property or the category where it is not property or the category where it is not property?  The property or the category where it is not property or the category where it is not property?  The property?  The property or the category where it is an asset only or other description or the category where every question.  The property or the category where it is the property?  The property or the category where it is an asset only or other description or category where every question.  The property?  The property or the category where every question.  The property or the category wher	official For	m 1064/F	2					
Active to the category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where not it if its best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), swere every question.    The property of the content of the property of the content of the property of the property of the property of the property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims or exemptions. Property of the amount of any secured claims o			_					
nk it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). were every question.  The control of the property of the amount of any secured claims or exemptions. Purple and the property of the amount of any secured claims or exemptions. Purple and the property of the amount of any secured claims or exemptions. Purple and the property of the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Propertion of the property of the centire property of the entire property of the entire property of the property of the property of the entire p								
What is the property?  What is the property? Check all that apply  4118 Bowdoin  Street address, if available, or other description  Des Moines  IA 50313-0000  City  State  ZIP Code  Manufactured or mobile home  Land  Investment property  Investment property  Investment property  Cother  Who has an interest in the property? Check one  Describe the nature of your ownership interest (such as fee simple, tenancy by the entiretie a life estate), if known.  Polk  County  What is the property? Check all that apply  Single-family home  Do not deduct secured claims or exemptions. P the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property  Land  Current value of the entire property?  portion you own?  \$108,000.00  \$108,000  Describe the nature of your ownership interest (such as fee simple, tenancy by the entiretie a life estate), if known.  Polk  County  Check if this is community property  (see instructions)  Check if this is community property  (see instructions)			uilding, Land, or Ot	her Rea	Estate You Own or Have an Interest In			
What is the property? Check all that apply  4118 Bowdoin  Street address, if available, or other description  Des Moines  IA 50313-0000  City  State  ZIP Code  Manufactured or mobile home Land Investment property Inmeshare Other Other  Who has an interest in the property? Check one Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	Do you own or ha	ve any legal or eq	juitable interest in a	ny resid	lence, building, land, or similar property?	•		
What is the property? Check all that apply  4118 Bowdoin  Street address, if available, or other description  Des Moines  IA 50313-0000  City  State  ZIP Code  Manufactured or mobile home Land Investment property Inmeshare Other Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	☐ No. Go to Part 2	2.						
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Street address, if available, or other description  Street address, if available, or other description  Des Moines  IA 50313-0000  City  State ZIP Code  Manufactured or mobile home Land  Land  Investment property  Investment property  Other  Who has an interest in the property? Check one Debtor 1 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local  Do not deduct secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Proper the amount of any secured claims or exemptions. Property find amount of any secured claims or exemptions. Property find amount of any secured claims or exemptions. Property find amount of any secured claims or exemptions. Property find amount of any secured claims or exemptions. Property find amount of any secured claims or scale alies and such as for a factor of the debtors who have claims or scale alies and another for divisions or exemptions. Property find amount of any secured claims or scale alies and another for divisions or scale alies and an								
Street address, if available, or other description  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land  Land  Land  Current value of the entire property?  Investment property  Investment property  Other  Who has an interest in the property? Check one Debtor 1 only  Debtor 2 only  At least one of the debtors and another Other information you wish to add about this item, such as local	1			Wha	t is the property? Check all that apply			
Des Moines  IA 50313-0000  City  State  ZIP Code  Investment property  Check one  Debtor 1 only  Debtor 2 only  County  Creditors Who Have Claims Secured by Property  Current value of the entire property?  portion you own?  Current value of the entire property?  \$108,000.00  \$108,000			porintion		Single-family home			
Manufactured or mobile home	Street address, it	avallable, of other des	scription		· ·			
Des Moines  IA 50313-0000  City  State  ZIP Code  Investment property Inmeshare Other Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local  Current value of the entire value of the entire property? Current value of the entire value v					Condominium or cooperative			
City  State  ZIP Code  Investment property  Timeshare Other Who has an interest in the property? Check one Debtor 1 only  Debtor 2 only  County  County  County  S108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  \$108,000.00  S108,000.00  Counter interest in the property? Check one a life estate), if known.  Check if this is community property (see instructions)  Other information you wish to add about this item, such as local	D		50040 0000			Current va	lue of the	Current value of the
Polk  County  Describe the nature of your ownership intered (such as fee simple, tenancy by the entiretie a life estate), if known.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local						• • •	•	
Polk  County  Other  Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local  (such as fee simple, tenancy by the entiretie a life estate), if known.  County  Check if this is community property (see instructions)	City	State	ZIF Code					
Polk  County  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local					Other	(such as fe	ee simple, ten	
Polk  County  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local				Who	• • •	a life estat	e), if known.	
County  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local	Polk			_	- 			
At least one of the debtors and another  Other information you wish to add about this item, such as local				_	20210. 2 0111)			
·					•			imunity property
property identification number:					_	item, such as lo	cal	
				prop	erty identification number:			
					your entries from Part 1, including a			\$108,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debte		Cadillac  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only mation:  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Current value of the entire property?  \$4,575.00  Do not deduct secured claims or exemptions. Put the amount of any secured by Property.  Current value of the entire property?  \$4,575.00  \$4,575.00  Current value of the portion you own?  \$4,575.00  Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the entire property?		
3. <b>Ca</b>	rs, vans, trucks, tractors, sport utility	vehicles, motorcycles		
	No			
	Yes			
0.4	u . cadillac	W	Do not deduct secured of	laims or exemptions. Put
3.1	-1-	– <u> </u>	the amount of any secure	ed claims on Schedule D:
		,		
		<del>_</del>		
	Other information:		ontilo proporty :	portion you out.
				•
			\$4,575.00	\$4,575.00
3.2	Make: <b>GMC</b>	Who has an interest in the property? Check one		
		·		
	Approximate mileage: 275000	<del>_</del>		
	Other information:	☐ At least one of the debtors and another		
		, , , ,	\$500.00	\$500.00
				\$5,075.00
Part 3	Describe Your Personal and Househol	d Items		
Do y	ou own or have any legal or equitable	e interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	susehold goods and furnishings camples: Major appliances, furniture, line No Yes. Describe	ens, china, kitchenware		·
		oods and furnishings		\$3,000.00
				· · · · · · · · · · · · · · · · · · ·
	ectronics kamples: Televisions and radios; audio, including cell phones, cameras	video, stereo, and digital equipment; computers, printe s, media players, games	ers, scanners; music collecti	ions; electronic devices
	No Yes. Describe			
E)	other collections, memorabilia	gs, prints, or other artwork; books, pictures, or other art , collectibles	t objects; stamp, coin, or ba	aseball card collections;
	No Yes. Describe			

Official Form 106A/B Schedule A/B: Property

page 2

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Case number (if known) Document Debtor 1 Marilyn T Kennedy 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... **Wedding Ring** \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$5.00 2 cats \$25.00 dog 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,580.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

☐ No

Institution name: Yes.....

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Case number (if known) Document Debtor 1 Marilyn T Kennedy Checking #1047887904 Wells Fargo \$471.19 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

Page 14 of 53
Case number (if known) Document Debtor 1 Marilyn T Kennedy 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else □ No Yes. Give specific information.. Unknown **Accrued Unpaid Wages** 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$471.19 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

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Case number (if known) Document

Debtor 1 Marilyn T Kennedy

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$108,000.00 Part 2: Total vehicles, line 5 \$5.075.00 57. Part 3: Total personal and household items, line 15 \$3,580.00 Part 4: Total financial assets, line 36 58. \$471.19 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$9,126.19 Copy personal property total \$9,126.19

Official Form 106A/B Schedule A/B: Property page 6

\$117,126.19

	I A A A A A A A A A A A A A A A A A A A	111 1 1111. 11111.	A 2
mation to identify your	case:		
Marilyn T Kenned	ly		
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
			☐ Check if this is a amended filing
	Marilyn T Kennec First Name	Marilyn T Kennedy First Name Middle Name  First Name Middle Name	Marilyn T Kennedy  First Name Middle Name Last Name  First Name Middle Name Last Name

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
4118 Bowdoin Des Moines, IA 50313 Polk County	\$108,000.00		\$108,000.00	Iowa Code §§ 561.2, 561.16, 499A.18
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2010 cadillac cts 122000 miles Line from Schedule A/B: 3.1	\$4,575.00		\$0.00	lowa Code § 627.6(9)
Line nom Schedule A/D. 9.1			100% of fair market value, up to any applicable statutory limit	
1996 GMC Suburban 1500 275000 miles	\$500.00		\$500.00	lowa Code § 627.6(9)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household goods and furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$3,000.00	lowa Code § 627.6(5)
Line nom Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	lowa Code § 627.6(5)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

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De	ebtor 1 Marilyn I Kennedy			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that allow e portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Wedding Ring Line from Schedule A/B: 12.1	\$50.00		\$50.00	Iowa Code § 627.6(1)(a)
	Zine nom estisado 702. 1211			100% of fair market value, up to any applicable statutory limit	lowa Code § 627.6(1)(a)  lowa Code § 627.6(14)  lowa Code § 627.6(10)  lowa Code § 627.6(14)
	Checking #1047887904: Wells Fargo Line from Schedule A/B: 17.1	\$471.19		\$471.19	lowa Code § 627.6(14)
	Line nom schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	Accrued Unpaid Wages Line from Schedule A/B: 30.1	Unknown		Unknown	lowa Code § 627.6(10)
	Line Ironi Scriedule A/B. 30.1			100% of fair market value, up to any applicable statutory limit	
	Accrued Unpaid Wages Line from Schedule A/B: 30.1	Unknown		Unknown	Iowa Code § 627.6(14)
	Line Holli Schedule PVD. 30.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 No			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				

	· ·,	Document	Page 18	3 of 53		
Fill in this info	rmation to identify yοι	ır case:				
Debtor 1	Marilyn T Kenne	edv				
	First Name	Middle Name	Last Name		-	
Debtor 2	First Name	Middle Nove	LastName			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	Sankruptcy Court for the	SOUTHERN DISTRICT OF IC	)WA			
Case number						
(if known)					☐ Chec	cif this is an
					amen	ded filing
O#:=:=!	400D					
Official For			_			
Schedule	D: Creditors	Who Have Claims	Secure	d by Propert	у	12/15
is needed, copy to number (if known	he Additional Page, fill it o	out, number the entries, and attach it				
	rs have claims secured by	, , , ,				
☐ No. Che	ck this box and submit t	his form to the court with your othe	r schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill	in all of the information	below.				
Part 1: List	All Secured Claims					
		more than one secured claim, list the cr			Column B	Column C
		s a particular claim, list the other credito cal order according to the creditor's nar		Amount of claim Do not deduct the		
			d a data	value of collateral.	claim	if any
2.1 Greater Creditor's Na	lowa Credit Un			\$14,335.00	\$4,575.00	\$9,760.00
0.00.0.0.0.0.0		2010 Cadillac Cts 122000 IIII	iles			
		As of the data you file the claim is	. Ob a also all the st			
801 Linc	•	apply.	- Cneck all that			
Ames, IA		Contingent				
Number, Stre	eet, City, State & Zip Code	Unliquidated				
Who owes the	debt? Check one.	Disputed				
_	debt? Check one.	Nature of lien. Check all that apply.		a a		
Debtor 1 only		car loan)	mortgage or sec	curea		
☐ Debtor 2 only ☐ Debtor 1 and	Dobtor 2 only	Chatutanulian (auch as tay lian ma	aabaniala lian)			
	f the debtors and another	☐ Judgment lien from a lawsuit	echanic's lien)			
_	claim relates to a	☐ Other (including a right to offset)				
community		— Other (including a right to onset)	Last Name  STRICT OF IOWA  Claims Secured by Property  12/15  are filing together, both are equally responsible for supplying correct information. If more space s, and attach it to this form. On the top of any additional pages, write your name and case  with your other schedules. You have nothing else to report on this form.  Claim, list the creditor separately he other creditor's name.  Column A  Amount of claim Do not deduct the value of collateral that supports this claim  St 122000 miles  Amount of claim Do not deduct the value of collateral that supports this claim  St 122000 miles  Le, the claim is: Check all that  Amount of claim Do not deduct the value of collateral that supports this claim  St 122000 miles  Le, the claim is: Check all that			
	Opened					
	05/16 Last Active					

Date debt was incurred 4/24/19

7131

Last 4 digits of account number

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Debtor 1 Marilyn T Kennedy	Case number (if known)			
First Name Middle Na	me Last Name			
2.2 Home Point Financial Corporation	Describe the property that secures the claim:	\$83,877.00	\$108,000.00	\$0.00
Creditor's Name Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234	4118 Bowdoin Des Moines, IA 50313 Polk County  As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code  Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or scar loan)	secured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
community debt  Opened 04/16 Last Active 05/19	Last 4 digits of account number 5019	9		
Add the dollar value of your entries in Co If this is the last page of your form, add t Write that number here:	olumn A on this page. Write that number here: he dollar value totals from all pages.	\$98,212. \$98,212.		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Oa	30 10 0112+ mjr	Docume	ent Page 20 of 53	7 II.40.00 L	7000 Main
Fill in this int	formation to identify your				
Debtor 1	Marilyn T Kenned	V			
DODIO! !	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
Case number					
(if known)					Check if this is an
				a	mended filing
Official Ec	orm 106E/F				
	<u>e E/F: Creditors W</u>	ha Haya Uncasi	urad Claims		12/15
			PRIORITY claims and Part 2 for creditors wit	th MONDRIODITY atai	
Schedule D: Cro left. Attach the name and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	ured by Property. If more s e. If you have no information	106G). Do not include any creditors with par pace is needed, copy the Part you need, fill on to report in a Part, do not file that Part. O	it out, number the en	tries in the boxes on the
	at All of Your PRIORITY Un				
′	editors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
Yes.	A All of Vour NONDDIODIT	V Unacquired Claims			
	at All of Your NONPRIORIT				
	editors have nonpriority unsec	-			
☐ No. You	have nothing to report in this p	art. Submit this form to the co	ourt with your other schedules.		
Yes.					
unsecured	claim, list the creditor separately	y for each claim. For each cla	der of the creditor who holds each claim. If a similar listed, identify what type of claim it is. Do not 3.If you have more than three nonpriority unsections.	ot list claims already inc	cluded in Part 1. If more
					Total claim
4.1 Big F	Picture Loans	Last 4 digit	s of account number		\$1,500.00
E239	iority Creditor's Name 070 Pow Wo2793.w Trai	When was t	the debt incurred?		
	ersmeet, MI 49969 er Street City State Zip Code	As of the da	ate you file, the claim is: Check all that apply		
	ncurred the debt? Check one.	7.0 01 1.10 0.0	are you me, the diam io. officer all that apply		
■ <sub>De</sub>	btor 1 only	☐ Continge	ent		
□ De	btor 2 only	☐ Unliquida			
	btor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and and		NPRIORITY unsecured claim:		
□сн	eck if this claim is for a com	munity	loans		
debt Is the	claim subject to offset?	☐ Obligation report as pri	ons arising out of a separation agreement or diviority claims	vorce that you did not	
■ No		☐ Debts to	pension or profit-sharing plans, and other simil	lar debts	
☐ Ye	S	Other S	pecify		

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Debtor 1 Marilyn T Kennedy Case number (if known) 4.2 \$989.00 Capital One Last 4 digits of account number 0677 Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/16 Last Active Po Box 30285 When was the debt incurred? 2/22/18 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Cavalry Portfolio Services** 4.3 Last 4 digits of account number 4568 \$1,107.00 Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 08/18 Last Active 500 Summit Lake Ste 400 When was the debt incurred? 01/18 Valhalla, NY 10595 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Citibank** 4.4 **Cavalry Portfolio Services** Last 4 digits of account number 0447 \$623.00 Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 10/18 Last Active 500 Summit Lake Ste 400 When was the debt incurred? 12/17 Valhalla, NY 10595 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Citibank

Page 22 of 53 Document Debtor 1 Marilyn T Kennedy ase number (if known) 4.5 **CAVALRY SPV I LLC** \$1,107.59 Last 4 digits of account number 1086 Nonpriority Creditor's Name c/o When was the debt incurred? John Louis Kramer III 2536 73rd St Urbandale, IA 50322 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 Dept of Ed / Navient Last 4 digits of account number 0724 \$50,502.00 Nonpriority Creditor's Name Opened 07/17 Last Active Attn: Claims Dept 4/30/19 Po Box 9635 When was the debt incurred? Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify **Educational** 4.7 **Discover Financial** Last 4 digits of account number 7921 \$6,027.00 Nonpriority Creditor's Name **Attn: Bankruptcy Department** Opened 05/16 Last Active Po Box 15316 When was the debt incurred? 06/18 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another

Official Form 106 E/F

■ No

☐ Yes

■ Other. Specify Credit Card

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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_ Marilyn i Kennedy _		Case number (if known)	
Ez money Nonpriority Creditor's Name	Last 4 digits of account number		\$500.00
1238 e 14th	When was the debt incurred?		
Des Moines, IA 50316			
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	Пол		
<u> </u>	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	a ciaiii.	
☐ Check if this claim is for a community	_	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
First Premier Bank	Last 4 digits of account number	4548	\$1,152.00
Nonpriority Creditor's Name	_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 08/16 Last Active 11/10/17	
Sioux Falls, SD 57117	when was the dept incurred?	11/10/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
/ho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	l	
First Premier Bank		5900	\$743.00
Inst Fremier Bank Inspriority Creditor's Name	Last 4 digits of account number		\$743.00
Attn: Bankruptcy		Opened 01/15 Last Active	
Po Box 5524	When was the debt incurred?	12/17	
Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that annly	
Who incurred the debt? Check one.	76 of the date you me, the claim	o. Oncok an mat apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other, Specify Credit Card	1	

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Debtor	Marilyn T Kennedy	——————————————————————————————————————	Case number (if known)	
4.1	hometown cash advance	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name 1335 E university Des Moines, IA 50310	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.1	LVNV Funding/Resurgent Capital	Last 4 digits of account number	3152	\$1,276.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 07/18 Last Active 12/17	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	·	Company Account Credit One	
4.1 3	LVNV Funding/Resurgent Capital  Nonpriority Creditor's Name	Last 4 digits of account number	1066	\$820.00
	Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 7/19/18 Last Active 4/26/19	
	Greenville, SC 29603  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	П о		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Bank N.A.	Company Account Credit One	

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No

Other. Specify Bank

**Factoring Company Account Synchrony** 

Debts to pension or profit-sharing plans, and other similar debts

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

debt

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Document Page 26 of 53 Debtor 1 Marilyn T Kennedy ase number (if known) 4.1 \$601.00 Midland Funding 2594 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/18 Last Active 2365 Northside Dr Ste 300 When was the debt incurred? 11/17 San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.1 Pay day express \$500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 3889 E 14th When was the debt incurred? Des Moines, IA 50313 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Portfolio Recovery 8564 \$1.877.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 09/18 Last Active Po Box 41021 When was the debt incurred? 4/26/19 Norfolk, VA 23541 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

Official Form 106 E/F

■ No

☐ Yes

Other Specify Bank Usa N.A.

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

**Factoring Company Account Capital One** 

Is the claim subject to offset?

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Debtor 1 Marilyn T Kennedy Case number (if known) 4.2 Portfolio Recovery 2985 \$913.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 09/18 Last Active Po Box 41021 When was the debt incurred? 4/26/19 Norfolk, VA 23541 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Comenity** ☐ Yes Other. Specify Bank 4.2 **Preferred Credit Inc** 3216 \$1,705.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/17 Last Active Po Box 1970 When was the debt incurred? 4/26/19 St Cloud, MN 56301 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Secured Other. Specify 4.2 **Ryan Gravett** \$7,000.00 Last 4 digits of account number Nonpriority Creditor's Name 2961 100th St Suite 8 When was the debt incurred? Urbandale, IA 50322 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify attorney fees ☐ Yes

Synchrony Bank/ Old Navy	Last 4 digits of account number	9499	\$526
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, El 32896	When was the debt incurred?	Opened 07/16 Last Active 10/23/18	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	og plans, and other similar debts	
Yes	■ Other. Specify Charge Acc		
Synchrony Bank/Care Credit		5546	\$73
Nonpriority Creditor's Name	Last 4 digits of account number		<b>\$13</b>
Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 05/17 Last Active 12/17	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,,	an and apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	ng plans, and other similar debts	
■ No □ Yes			
⊔ Yes	Other. Specify Charge Acc	count	
Wells Fargo Bank NA	Last 4 digits of account number	0314	\$3,80
Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus Mac X2303-01a	When was the debt incurred?	Opened 08/11 Last Active 12/17	
Des Moines, IA 50328  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	ne of the date yearne, the claim	o. Oncox an inat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card	i	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Case number (if known) Document

Debtor 1 Marilyn T Kennedy

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Benjamin Bragg 6681 Country Club Drive Minneapolis, MN 55427

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4292

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim 50,502.00
Total claims				·	33,332.33
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,300.59
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	89,802.59

Fill in this infor	mation to identify your	case:		
Debtor 1	Marilyn T Kenned	dy		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	,		<b>-</b>		

		Docume	ent Page 31 o	of 53	
Fill in thi	s information to identify your	case:			
Debtor 1	Marilyn T Kenne First Name	Middle Name	Last Name		
Debtor 2	. not reame	made Hame	Zaot Hamo		
(Spouse if, fi	lling) First Name	Middle Name	Last Name		
	. 5	OOLITHEDN DIOTDIOT	05.1014/4		
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
Case nun	nher				
(if known)				☐ Check if this i	is an
				amended filin	ıg
				<u>.</u>	
Officia	al Form 106H				
Scho	dule H: Your Cod	lahtare			40/4E
SCHE	dule H. Tour Coc	ienioi 2			12/15
2. Wi Arizo	thin the last 8 years, have yo na, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spo	u lived in a community pr a, Nevada, New Mexico, Pu ouse, or legal equivalent live	roperty state or territo erto Rico, Texas, Wash e with you at the time? spouse as a codebto	ry? (Community property states and territories inc ington, and Wisconsin.) r if your spouse is filing with you. List the pers	son shown
Form				sure you have listed the creditor on Schedule 06G). Use Schedule D, Schedule E/F, or Sched	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe	the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedules that apply:	tile debt
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			<u> </u>	
	City	State	ZIP Code		
				_	
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to	identify your ca	ico.								
	otor 1	Marilyn T Ke									
	otor 2 ouse, if filing)		-			_					
Uni	ted States Bankrupt	cy Court for the:	SOUTHERN DISTRIC	T OF IOWA		_					
(If kn	se number	<u>106I</u>					13 ir	amende uppleme	nt showing	g postpetitior ollowing date:	
S	chedule I: \	Your Inco	ome								12/15
sup <sub>i</sub> spo atta	plying correct inforuse. If you are sepa ch a separate shee	rmation. If you arated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i de infori	is livii matio	ng with yo n about yo	ou, inclu our spo	ide inform use. If mo	nation about ore space is	your needed,
1.	Fill in your emplo	yment		Debtor 1			D	ebtor 2	or non-fil	ling spouse	
	If you have more t		Employment status	■ Employed				☐ Employed			
	attach a separate		Employment status	☐ Not employed				☐ Not employed			
	employers.		Occupation	corrections officer							
	Include part-time, seasonal, or self-employed work.		Employer's name	Mitchellville Co Facility	rrection	nal					
	Occupation may in or homemaker, if it		Employer's address	420 Mill St SW Mitchellville, IA 50169							
			How long employed the	nere? 1 year				_			
	•	ails About Mon	thly Income	vou have nothing to r	enort for	anv lir	ne write \$(	Ω in the	snace Inc	dude vour no	n-filing
	use unless you are s		<b>,</b>	, ou have hearing to t	oport ioi	arry iii	io, milo y		opaco. mo	nado your no	9
	u or your non-filing s e space, attach a se		re than one employer, co	ombine the informatio	n for all e	employ	yers for tha	at persoi	n on the lir	nes below. If	you need
							For Debto	or 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$_	3,48	34.00	\$	N/A	-
3.	Estimate and list	monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	<u>-</u>
4.	Calculate gross I	ncome. Add lin	e 2 + line 3.		4.	\$_	3,484.	.00_	\$	N/A	

Deb	tor 1	Marilyn T Kennedy			Case	e number (if known)	-				
					Fo	r Debtor 1			ebtor iling s	2 or pouse	
	Cop	y line 4 here	4.		\$_	3,484.00		\$		N/A	-
5.	List	all payroll deductions:									
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans		b.	\$_ \$_	610.98 244.94	_	\$ \$		N/A N/A	_
	5c. 5d. 5e.	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	50 50 50	d.	\$_ \$_ \$_	81.25 0.00 214.02		\$ \$		N/A N/A N/A	
	5f. 5g.	Domestic support obligations Union dues	5f 5g	f. g.	\$ _ \$	0.00	_	\$		N/A N/A	-
0	5h.	Other deductions. Specify: HSA	_	h.+	\$_ _	81.25	_	· · · · · ·		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	1,232.44	_	\$		N/A	-
7. 8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross	7.	•	\$_	2,251.56	_	\$		N/A	-
		receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00		\$		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	81	b.	\$_	0.00	_	\$		N/A	-
		settlement, and property settlement.	80	c.	\$	0.00		\$		N/A	
	8d.	Unemployment compensation		d.	\$_	0.00	_	\$		N/A	_
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8¢		\$_ \$	0.00	-	\$ \$		N/A N/A	-
	8g.	Pension or retirement income	- 8		\$-	0.00	_	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0.00	+	- \$		N/A	- -
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.00		\$		N/A	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,251.56 +	S_		N/A	= \$ _	2,251.56
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies							12.	\$	2,251.56
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?						·	Combi month	ned y income
	_	Van Fundain									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Marilyn T Ke	nnedy			Ch∈	eck if this is:  An amended filing	
	tor 2 ouse, if filing)						A supplement show	wing postpetition chapter the following date:
` '	, 0,	ruptcy Court for the	: SOUTH	IERN DISTRICT OF IOWA			MM / DD / YYYY	
	e number	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
1	nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par 1.	t 1: Descr	ribe Your House	hold					
	■ No. Go to	line 2.	·	ate household?				
	□ res. <b>Doe</b>		ın a separ	ate nousenoid?				
	_		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				Con			□ No
	dependents	names.			Son			■ Yes □ No
					Daughter		6	Yes
					Daughter		8	□ No ■ Yes
								□ No
3.	Do your ove	penses include	_		Son		9	■ Yes
Э.	expenses o	f people other to d your depende	<sup>han</sup> . □	No Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
4.	The rental of	or home owners		ses for your residence.	nclude first mortgag	e 4.	\$	760.00
	, ,	nd any rent for the	e ground d	I IOL		٦.	¥	
		led in line 4:						
		estate taxes rty, homeowner's	s, or renter	's insurance		4a. 4b.	·	0.00 0.00
	•	•		pkeep expenses		4c.	·	100.00
_		owner's associat				4d.	•	0.00
5.	Additional r	ποrtgage payme	ents for yo	our residence, such as ho	me equity loans	5.	<b>Description</b>	0.00

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies are and children's education costs ng, laundry, and dry cleaning nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106i). payments you make to support others who do not live with you. y: real property expenses not included in lines 4 or 5 of this form or on Schedule leaded in the services. Real estate taxes	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 18.	\$	277.00 130.00 470.00 0.00 1,100.00 200.00 90.00 300.00 300.00 100.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00 0.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies are and children's education costs and, laundry, and dry cleaning and care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Wehicle insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Sched. Mortgages on other property	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15d. 15d. 17d. 17d. 18.	\$	130.00 470.00 0.00 1,100.00 200.00 90.00 50.00 300.00 100.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ng, laundry, and dry cleaning nal care products and services al and dental expenses orortation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you. y: real property expenses not included in lines 4 or 5 of this form or on Sched Mortgages on other property	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15d. 15d. 17d. 17d. 18.	\$	130.00 470.00 0.00 1,100.00 200.00 90.00 50.00 300.00 100.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies are and children's education costs ang, laundry, and dry cleaning and care products and services all and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ance. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Wehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you. y: real property expenses not included in lines 4 or 5 of this form or on Sched. Mortgages on other property	6d. 7. 8. 9. 10. 11. 12. 13. 14.  15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	470.00
Other. Specify: and housekeeping supplies are and children's education costs ing, laundry, and dry cleaning hal care products and services al and dental expenses cortation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	7. 8. 9. 10. 11. 12. 13. 14.  15a. 15b. 15c. 15d.  17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 1,100.00 200.00 90.00 50.00 300.00 100.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00
rare and children's education costs ing, laundry, and dry cleaning hal care products and services al and dental expenses cortation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Wehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  Image: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Deter. Specify: Deter. Specify: Deter. Specify: Deter of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  Income of this form or on Schedule I property expenses not included in lines 4 or 5 of this form or on Schedule I property expenses not included in lines 4 or 5 of this form or on Schedule I property expenses not included in lines 4 or 5 of this form or on Schedule I property expenses not included in lines 4 or 5 of this form or on Schedule I property	8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,100.00 200.00 90.00 50.00 300.00 100.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00
ng, laundry, and dry cleaning nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations nce. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  Improved the contributions and religious donations nce. Include insurance deducted from your pay or included in lines 4 or 20.  Include insurance Other insurance. Other insurance. Specify: Include taxes deducted from your pay or included in lines 4 or 20.  Include insurance Other insurance. Other insurance. Other of lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  Included in lines 4 or 5 of this form or on Schedul Mortgages on other property	9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17d. 17a. 17d. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	90.00 50.00 300.00 300.00 100.00 0.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00 0.00
nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00 300.00 300.00 100.00 0.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00 0.00
al and dental expenses portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	300.00 300.00 100.00 0.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00 0.00
portation. Include gas, maintenance, bus or train fare. include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince.  include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Wehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20. y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	12. 13. 14.  15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	300.00 100.00 0.00 24.00 0.00 308.00 0.00 435.00 0.00 0.00 0.00
include car payments. ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince. include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.  Image: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  Income included in lines 4 or 5 of this form or on Schede Mortgages on other property	13. 14.  15a. 15b. 15c. 15d.  16.  17a. 17b. 17c. 17d.  18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 0.00 24.00 0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00 0.00
ainment, clubs, recreation, newspapers, magazines, and books able contributions and religious donations ince.  include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20. y: ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	14.  15a. 15b. 15c. 15d.  16.  17a. 17b. 17c. 17d.  18.	\$	24.00 0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00
able contributions and religious donations ince.  include insurance deducted from your pay or included in lines 4 or 20.  Life insurance Health insurance Vehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  We ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  payments you make to support others who do not live with you.  We real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	24.00 0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00
include insurance deducted from your pay or included in lines 4 or 20.  Life insurance  Health insurance  Vehicle insurance  Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  We ment or lease payments:  Car payments for Vehicle 1  Car payments for Vehicle 2  Other. Specify:  Other. Specify:  Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  payments you make to support others who do not live with you.  We real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	24.00 0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00
Life insurance Health insurance Vehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  The system of lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Cayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  Deayments you make to support others who do not live with you.  The system of this form or on Schede Mortgages on other property	15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00
Health insurance Vehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  We ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  payments you make to support others who do not live with you.  We real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 308.00 0.00 0.00 435.00 0.00 0.00 0.00
Vehicle insurance Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  W:  ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  payments you make to support others who do not live with you.  W:  real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	15c. 15d. 16. 17a. 17b. 17c. 17d. 18.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	308.00 0.00 0.00 435.00 0.00 0.00 0.00
Other insurance. Specify:  Do not include taxes deducted from your pay or included in lines 4 or 20.  We ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  We real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	15d. 16. 17a. 17b. 17c. 17d.	\$	0.00 0.00 435.00 0.00 0.00 0.00
Do not include taxes deducted from your pay or included in lines 4 or 20.  ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  The property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$	0.00 435.00 0.00 0.00 0.00
ment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  The property expenses not included in lines 4 or 5 of this form or on Schedule Mortgages on other property	17a. 17b. 17c. 17d.	\$	435.00 0.00 0.00 0.00 0.00
Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  The property expenses not included in lines 4 or 5 of this form or on Schedule Mortgages on other property	17b. 17c. 17d. 18.	\$ \$ \$	0.00 0.00 0.00 0.00
Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  Y: real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	17b. 17c. 17d. 18.	\$ \$ \$	0.00 0.00 0.00 0.00
Other. Specify: Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  Y: real property expenses not included in lines 4 or 5 of this form or on Schedule Mortgages on other property	17c. 17d. 18.	\$	0.00 0.00 0.00
Other. Specify:  payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y:  real property expenses not included in lines 4 or 5 of this form or on Schedule Mortgages on other property	17d.	\$	0.00
payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schedule Mortgages on other property	— 18.	· ———	0.00
ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). payments you make to support others who do not live with you.  y: real property expenses not included in lines 4 or 5 of this form or on Schedul		\$ \$	
y:	10	\$	0.00
real property expenses not included in lines 4 or 5 of this form or on Schede Mortgages on other property	10	*	0.00
Mortgages on other property			
	20a.	·	0.00
	20b.	·	0.00
Property, homeowner's, or renter's insurance	20c.	·	0.00
Maintenance, repair, and upkeep expenses	20d.	· <u> </u>	0.00
Homeowner's association or condominium dues	20e.		0.00
Specify: Household	21.		50.00
	_		50.00
	_	· -	160.00
·			50.00
	_		250.00
	_		400.00
		+\$	10.00
husband's name)		+\$	115.00
ate your monthly expenses			
		\$	5,729.00
opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· · · · · · · · · · · · · · · · · · ·
		\$	5,729.00
ate your monthly net income.			
Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,251.56
Copy your monthly expenses from line 22c above.	23b.	-\$	5,729.00
	23c.	\$	-3,477.44
֡֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜		ture (husband's name) (husband's name) etts t Cards (husband's name) c Club (husband's name) husband's name) late your monthly expenses dd lines 4 through 21. opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 dd line 22a and 22b. The result is your monthly expenses. late your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.  Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. u expect an increase or decrease in your expenses within the year after you file this imple, do you expect to finish paying for your car loan within the year or do you expect your mortgage	ture (husband's name)  (husband's name)  etts  t Cards (husband's name)  c Club (husband's name)  (husband's name)  thusband's name)  (husband's name)  (hus

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Fill in this infor	mation to identify your	case:				
Debtor 1	Marilyn T Kenned	ly				
	First Name	Middle Name	Last Nam	пе	_	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Nam	10		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA			
Case number						
(if known)					☐ Ch	eck if this is an
					am	nended filing
You must file thi	is form whenever you fi	r, both are equally respond le bankruptcy schedules n connection with a bank 519, and 3571.	or amended so	chedules. Making a fals	se statement, conce	
Sig	n Below					
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you	ı fill out bankruptcy for	rms?	
■ No						
☐ Yes. I	Name of person				ch Bankruptcy Petition Claration, and Signatur	
	alty of perjury, I declare te true and correct.	that I have read the sum	mary and sched	dules filed with this de	claration and	
X /s/ Mai	rilyn T Kennedy		X			
Marily	n T Kennedy		Sig	nature of Debtor 2		
Signatu	re of Debtor 1					
Date	May 16, 2019		Dat	te		

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Fill	in this inform	nation to identify you	r case:			
	tor 1	Marilyn T Kenne				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT (	OF IOWA		
Cas	e number					
(if kno	_				-	Check if this is an mended filing
Off	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/19
infor	mation. If m	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
		n). Answer every que				
			erital Status and Where You	ı Lived Before		
1.	wnat is your	current marital statu	IS?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do n	ot include where you live now	<b>'</b> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
state	s and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	/isconsin.)
	■ No					
		ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explai	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$18,910.38	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Marilyn T Kennedy

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$32,387.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$24,107.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		

#### Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

□ No

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
2018 Federal Tax Refund	\$8,794.00		
2018 State Tax Refund	\$267.00		
Unemployment	\$3,653.00		
2017 Federal Income Tax Refund	\$3,303.00		
2017 State Tax Refund	\$257.00		
	2018 Federal Tax Refund  2018 State Tax Refund  Unemployment  2017 Federal Income Tax Refund  2017 State Tax	Sources of income Describe below.  2018 Federal Tax Refund  2018 State Tax Refund  Unemployment  2017 Federal Income Tax Refund  Gross income from each source (before deductions and exclusions)  \$8,794.00  \$267.00  \$3,653.00  2017 Federal Income Tax Refund  \$3,303.00  \$257.00	Sources of income Peach source (before deductions and exclusions)  2018 Federal Tax Refund  2018 State Tax Refund  Unemployment  \$3,653.00  2017 Federal Income Tax Refund  \$257.00

#### List Certain Payments You Made Before You Filed for Bankruptcy

3. <i>F</i>	Are either	Debtor 1's	or Debtor	2's debts	primarily	consumer	debts?
-------------	------------	------------	-----------	-----------	-----------	----------	--------

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

<sup>\*</sup> Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Del	otor 1 Marilyn T Ken	nedy	Document	Page 39 of 53	e number (if known)		
			ve primarily consumer d for bankruptcy, did you		of \$600 or more?		
	■ No.	Go to line 7.					
	☐ Yes	List below each credit	or to whom you paid a to domestic support obligat uptcy case.				
	Creditor's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before years include your rel of which you are an office a business you operate alimony.  No Yes. List all payme	atives; any general pa cer, director, person in as a sole proprietor. 1	artners; relatives of any g control, or owner of 20%	general partners; partner % or more of their voting	rships of which you securities; and an	u are a genera ly managing a	Il partner; corporations gent, including one fo
	Insider's Name and A		Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	Within 1 year before yeinsider? Include payments on de  No Yes. List all payme Insider's Name and A	ents to an insider		Total amount paid	Amount you still owe		this payment
9.	Within 1 year before you List all such matters, incomodifications, and control No	ou filed for bankrupte cluding personal injury	cy, were you a party in				
	Yes. Fill in the deta	nile					
	Case title Case number	alio.	Nature of the case	Court or agency		Status of th	e case
	CAVALRY SPV I LLC VS MARILYN T COWLES SCSC631086		small claims	Polk County Dis 500 Mulberry St Des Moines, IA	t	☐ Pending ☐ On appe ☐ Conclude	
	DISCOVER BANK V COWLES SCSC634292	/S MARILYN T	small claims collections	Polk County Dis 500 Mulberry St Des Moines, IA	İ	☐ Pending ☐ On appe ☐ Conclude	
10.	Within 1 year before you Check all that apply and  No. Go to line 11.  Yes. Fill in the info	fill in the details belov		operty repossessed, fo	oreclosed, garnis	hed, attached	l, seized, or levied?
	Creditor Name and A		Describe the Propert	fv	Date		Value of the
	Orealtor Haille and A	MMI 633	bescribe the riopen	.,	Date		property
			Explain what happer	ned			

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Page 40 of 53 Case number (if known) Debtor 1 Marilyn T Kennedy 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$14.95 www.debtorcc.org www.debtorcc.org

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	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment	
	Marks Law Firm 4225 University Avenue Des Moines, IA 50311	attorney fees				\$1,160.00	
17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you —	rs or to make payments			or transfer any prop	erty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and variansferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment	
<ul> <li>18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any proper transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>							
	Person Who Received Transfer Address  Person's relationship to you		property transferred		any property or s received or debts schange	Date transfer was made	
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No						
	☐ Yes. Fill in the details.  Name of trust	Description and	Description and value of the property transferred			Date Transfer was	
						made	
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Stora	age Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc ☐ No	r other financial accou	nts; certificates of		,	• • •	
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
	Wells Fargo P.O. Box 5169 Sioux Falls, SD 57117	XXXX-	☐ Checking ■ Savings ☐ Money Marke ☐ Brokerage ☐ Other		/2018	\$0.00	

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Debtor 1	Marilyn T Kennedy		Case number (if known)

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or p	·	year before you filed for bankruptcy	?				
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Par	9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	10: Give Details About Environmental Inform	ation						
For	he purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				

De	btor 1	Marilyn T Kennedy	Document Page	e 43 of 53 Case number (if known)	_
26.	Have	you been a party in any judicial or	administrative proceeding under a	any environmental law? Include settlements and orders.	
	_			•	
	_	No Yes. Fill in the details.			
		e Title	Court or agency	Nature of the case Status of the	
		e Number	Name Address (Number, Street, City State and ZIP Code)	case	
Pa	rt 11:	Give Details About Your Business	or Connections to Any Business	•	
27	With	in 4 years before you filed for bank	runtov, did vou own a business or	r have any of the following connections to any business?	
			• • •	ractivity, either full-time or part-time	
		☐ A member of a limited liability co			
		_	ompany (LLO) or infinited hability pa		
		☐ A partner in a partnership			
		☐ An officer, director, or managing			
		An owner of at least 5% of the vo	oting or equity securities of a corpo	poration	
		No. None of the above applies. Go	to Part 12.		
		Yes. Check all that apply above and	d fill in the details below for each b	business.	
		iness Name ress	Describe the nature of the bus	usiness Employer Identification number Do not include Social Security number or ITIN.	
		ber, Street, City, State and ZIP Code)	Name of accountant or bookk	•	
28.	insti	eutions, creditors, or other parties.	ruptcy, did you give a financial stat	atement to anyone about your business? Include all financial	
	_	Yes. Fill in the details below.			
		Ne ress ber, Street, City, State and ZIP Code)	Date Issued		
Pa	rt 12:	Sign Below			
are with 18 U	true a n a bai J.S.C.		g a false statement, concealing pro	ments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection r up to 20 years, or both.	n
		T Kennedy	Signature of Debtor 2	2	
Sig	natur	e of Debtor 1			
Da	te N	lay 16, 2019	Date		
Did ■ N	No	ttach additional pages to <i>Your Stat</i> e	ement of Financial Affairs for Indiv	ividuals Filing for Bankruptcy (Official Form 107)?	
Did ■ N		ay or agree to pay someone who is	not an attorney to help you fill out	ut bankruptcy forms?	
		ame of Person Attach the <i>Bai</i>	nkruptcy Petition Preparer's Notice, D	Declaration, and Signature (Official Form 119).	

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		200	ament rage rrere	
Fill in this infor	mation to identify your case			
Debtor 1	Marilyn T Kennedy			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: SO	UTHERN DIS	TRICT OF IOWA	
		OTTIETAT DIO	THE CONTRACT OF SOME	
Case number (if known)				☐ Check if this is an amended filing
			viduals Filing Under Chap  I out this form if:	oter 7 12/15
creditors have	e claims secured by your pr	operty, or		
You must file th	ever is earlier, unless the co	30 days after	ot expired. you file your bankruptcy petition or by the dat e time for cause. You must also send copies to	
	eople are filing together in a nd date the form.	joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must
	and accurate as possible. If your name and case number		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Y	our Creditors Who Have Sec	ured Claims		
For any credit information b	•	of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
	reditor and the property that is	collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's (	Greater Iowa Credit Un		☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of	f 2010 cadillac cts 12200	00 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	:		☐ Retain the property and [explain]:	
	Home Point Financial Cor	poration	☐ Surrender the property.	□No
name:			Retain the property and redeem it.	■ Yes
Description of	4118 Bowdoin Des Mo	ines, IA	Retain the property and enter into a Reaffirmation Agreement.	■ res

Part 2: List Your Unexpired Personal Property Leases

50313 Polk County

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

property

securing debt:

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Debtor 1 Marilyn T Kennedy	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased	☐ Yes
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about an property that is subject to an unexpired lease.	y property of my estate that secures a debt and any personal
X /s/ Marilyn T Kennedy X	
Marilyn T Kennedy Signature of Debtor 1	nature of Debtor 2
Date May 16, 2019 Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-01124-lmj7 Doc 1 Filed 05/16/19 Entered 05/16/19 11:49:30 Desc Main Document Page 50 of 53

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Iowa

In	re Marilyn T Kennedy		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	ATION OF ATTOR	NEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing o be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy, of	or agreed to be paid	to me, for services rendered	l or to
	For legal services, I have agreed to accept		\$	1,160.00	
	Prior to the filing of this statement I have received		\$	1,160.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	ation with any other person u	nless they are men	bers and associates of my la	ıw firm.
5.	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names.  In return for the above-disclosed fee, I have agreed to render a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed. Representation of the debtor at the meeting of creditors and additions as needed.  Negotiations with secured creditors to reduce reaffirmation agreements and applications.  By agreement with the debtor(s), the above-disclosed fee down Additional or Non-Base Legal Services POS the Base Retainer will be provided by Attor representing Client in: (a) Discharge proceed hardships; (b) motions for relief from, or composition to redeem personal property; (d) ref) contested matters or adversary proceed property; (h) filling any amendments to the abandon/refinance/sell/purchase property; monitoring an "asset case"; (l) re-opening counseling; (m) issues that arise that are negative.	of the people sharing in the or legal service for all aspects g advice to the debtor in deterent of affairs and plan which and confirmation hearing, and uce to market value; exercises not include the following ST-PETITION. Legal services proposed	compensation is att of the bankruptcy rmining whether to may be required; d any adjourned her mption planning service: ices which are be in additional fee related to studer inforcement of the e) motions to avers regarding Cl or adversary con out the Debtor's comit post-filing p	executed.  case, including: file a petition in bankruptcy urings thereof; ; preparation and filing of eyond those contempla including but not limite at loans, taxes or undue the Automatic Stay; (c) oid liens/judgments(\$50 ent's claim of exempt aplaints to Statement of Intentions proof of pre-discharge	of ted in ed to
	(	CERTIFICATION		-	
this	I certify that the foregoing is a complete statement of any agas bankruptcy proceeding.	greement or arrangement for p	payment to me for	representation of the debtor(	s) in
	May 16, 2019	/s/ Samuel Z. Mark	(S		
_	Date	Samuel Z. Marks		_	
		Signature of Attorney  Marks Law Firm, F			
		4225 University Av			
		Des Moines, IA 50		•	
		(515) 276-7211 Fa Office@markslaw		U	
		Name of law firm			

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### United States Bankruptcy Court Southern District of Iowa

In re	Marilyn T Kennedy		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF MASTER ADDRESS LIST ON PAPER (CREDITOR MATRIX)					
	I (we) declare under penalty of perjury that I (we) have read the attached Master Address  List (creditor matrix), consisting of 2 pages, and that it is true and correct to the best of my					
	(our) knowledge, information, and belief.					
Date:	May 16, 2019	/s/ Marilyn T Kennedy Marilyn T Kennedy				

Signature of Debtor

VER\_MTRX (Rev. 04/00)

Benjamin Bragg 6681 Country Club Drive Minneapolis, MN 55427

Big Picture Loans E23970 Pow Wo2793.w Trail Watersmeet, MI 49969

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

CAVALRY SPV I LLC c/o
John Louis Kramer III
2536 73rd St
Urbandale, IA 50322

Dept of Ed / Navient Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

Ez money 1238 e 14th Des Moines, IA 50316

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Greater Iowa Credit Un 801 Lincoln Way Ames, IA 50010

Home Point Financial Corporation Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234

hometown cash advance 1335 E university Des Moines, IA 50310 LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Pay day express 3889 E 14th Des Moines, IA 50313

Portfolio Recovery Po Box 41021 Norfolk, VA 23541

Preferred Credit Inc Po Box 1970 St Cloud, MN 56301

Ryan Gravett 2961 100th St Suite 8 Urbandale, IA 50322

Synchrony Bank/ Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328